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Under the Paperwork Rec	red to resp	respond to a collection of information unless it displays a valid OMB control number						
Effective on 12/08/2004.				Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number		10/569,791-Conf. #6478		
FEE TRANSMITTAL				Filing Date		February 27, 2006		
For FY 2009				First Named Inventor		Yorimasa SUWA		
				Examiner Name		M. P. Allen		
Applicant claims small entity status. See 37 CFR 1.27			Ar	t Unit		1647		
TOTAL AMOUNT OF PAYMENT (\$) 130.0		(\$) 130.00	Attorney Docket No.		No.	1254-0305PUS1		
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
,	•	G FEES	SEAR	CH FEES	EXAM	NATION FEES		
Analization Type		Small Entity	(¢)	Small Entity	F (¢)	Small Entity	F !	D_:_ (¢)
Application Type Utility	Fee (\$)		<u>ee (\$)</u>	Fee (\$)	Fee (\$)		rees i	Paid (\$)
,	330		540	270	220	110		
Design	220		100	50	140	70		
Plant	220		330	165	170	85		
Reissue	330		540	270	650	325		
Provisional	220	110	0	0	0	0		
2. EXCESS CLAIM FEES Small Entity  Fee Description Fee (\$) Fee (\$)								
Fee Description Each claim over 20 (including Reissues)							52	26
Each independent claim over 3 (including Reissues)							220	110
Multiple dependent claims 390 195								
Total Claims			Fee F	ee Paid (\$)		Multiple Dependent Claims		
2135 - or HP0 x =					<u>F</u>	ee (\$) <u>F</u>	ee Paid (	<u>3)</u>
HP = highest number of total cl								
	xtra Claims	Fee (\$)	Fee F	Paid (\$)				
3 5- or HP = 0 x = HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets	Extra Sheets	Number of ea	ach addit	ional 50 or frac	tion there	of Fee (\$)	Fee	Paid (\$)
100 = /50 = (round <b>up</b> to a whole number) x =								
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1251 Extension for response within first month 130.00								
Other (e.g., late filing s	surcharge): 12	251 Extension fo	r respo	nse within fir	st mont	n	13	30.00
SUBMITTED BY A STATE OF STATE								
Signature ( )	MM	1 *	Reg (Att	gistration No. orney/Agent)	28,977		(703) 20	
Name (Print/Type) Gerald	M. Murphy, Jr	7 / 1		······································		Date JUL (	9 200	J <del>9</del>

